

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P25761

**Entity Name:** RADIO TRAINING NETWORK, INC.

**Current Principal Place of Business:**

5015 S FLORIDA AVE.  
STE 409  
LAKELAND, FL 33813

**Current Mailing Address:**

2420 WADE HAMPTON BLVD.  
GREENVILLE, SC 29615

**FEI Number: 58-1585542**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name CAMPBELL, JAMES L  
Address 5015 S FLORIDA AVE STE 409  
City-State-Zip: LAKELAND FL 33813

Title VPD  
Name FREEMAN, LEE S  
Address 1958 MONROE DRIVE., NE  
City-State-Zip: ATLANTA GA 30324

Title STD  
Name MCBRIDE, DAN  
Address 1401 GRIFFIN RD.  
City-State-Zip: LAKELAND FL 33819

Title AS  
Name CAMPBELL, RUTH J  
Address 5015 S FLORIDA AVE STE 409  
City-State-Zip: LAKELAND FL 33813

Title CD  
Name WATKINS, MICHAEL L  
Address 4001 FLAMINGO AVE  
City-State-Zip: SARASOTA FL 34242

Title D  
Name MAXWELL, LARRY  
Address 500 SOUTH FLORIDA AVE STE 700  
City-State-Zip: LAKELAND FL 33801

Title DIRECTOR OF OPERATIONS  
Name MANER, ED L  
Address 6469 PARKLAND DR.  
City-State-Zip: SARASOTA FL 34243

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JAMES L CAMPBELL**

**PD**

**02/15/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date